

FROM : SALIWANCHIK, JE Kyle

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**TO:** Examiner Ko Hung Chan

**FAX NO.:** 1-571-273-8300

**COMPANY:** U.S. Patent & Trademark Office, Art Unit 3632

**FROM:** Jean Kyle (Reg. No. 36,987) *JK*

**NUMBER OF PAGES (INCLUDING COVER SHEET):** 2

**DATE:** October 26, 2005

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**SUBJECT/MESSAGE:** Re: Serial No. 10/736,804; Filed- 12/15/2003  
Docket No. LSN-4cdXCD1

1. Revocation of Power of Attorney-1 page

PTO/SB/82 (04-05)

Approved for use through 11/30/2005. OMB 0851-0035

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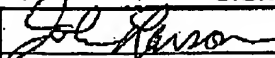
|                        |                   |
|------------------------|-------------------|
| Application Number     | 10/736,804        |
| Filing Date            | December 15, 2003 |
| First Named Inventor   | Larson            |
| Art Unit               | 3632              |
| Examiner Name          | Ko Hung Chan      |
| Attorney Docket Number | LSN-4cdXCD1       |

**I hereby revoke all previous powers of attorney given in the above-identified application.**☐ A Power of Attorney is submitted herewith.**OR**☐ I hereby appoint the practitioners associated with the Customer Number: ☒ Please change the correspondence address for the above-identified application to:☐ The address associated with  
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|   |               |       |    |     |       |
|---|---------------|-------|----|-----|-------|
| <input checked="" type="checkbox"/> Firm or Individual Name | John Larson   |       |    |     |       |
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I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

|           |   |           |              |  |  |
|-----------|---|-----------|--------------|--|--|
| Signature |  |           |              |  |  |
| Name      | John Larson   |           |              |  |  |
| Date      | 10-26-05  | Telephone | 406-363-3804 |  |  |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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